

Supplemental Application Data Sheet

Application Information

Application number:: 10/501,841
Filing Date:: July 14, 2004
Application Type:: Regular
Subject Matter:: Utility
Suggested classification:
Suggested Group Art Unit:
CD-ROM or CD-R???:
Number of CD disks:
Number of copies of CDs:
Sequence Submission:
Computer Readable Form (CRF)?:
Number of copies of CRF:
Title:: COMPOSITIONS AND METHODS FOR THE
DETECTION, DIAGNOSIS AND THERAPY OF
HEMATOLOGICAL MALIGNANCIES
Attorney Docket Number:: 014058-014413US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alexander
Middle Name::
Family Name:: Gaiger
Name Suffix::
City of Residence:: Vienna
State or Province of Residence:: Vienna
Country of Residence:: Austria
Street of Mailing Address:: Doeblinger Hauptstrasse 62/14
City of Mailing Address:: Vienna
State or Province of mailing address:: Vienna
Country of mailing address:: Austria
Postal or Zip Code of mailing address:: A-1190

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Paul
Middle Name:: A.
Family Name:: Algate
Name Suffix::
City of Residence:: Issaquah
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 580 Kalmia Place, NW
City of Mailing Address:: Issaquah

State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jane
Middle Name::
Family Name:: Mannion
Name Suffix::
City of Residence:: Edmonds
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 8904 - 192nd Street, SW
City of Mailing Address:: Edmonds
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98026

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: David
Family Name:: Clapper
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 2149 Dexter Avenue, North #4

City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Aijun
Middle Name::
Family Name:: Wang
Name Suffix::
City of Residence:: Issaquah
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 3106 - 213th Place, SE
City of Mailing Address:: Issaquah
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98029

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nadia
Middle Name::
Family Name:: Ordonez
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US

Street of Mailing Address:: 2011 North 154 Court
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98133

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lauren
Middle Name::
Family Name:: Carter
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 7143 Beach Drive, SW
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98136

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Patricia
Middle Name:: Dianne
Family Name:: McNeill
Name Suffix::
City of Residence:: Federal Way
State or Province of Residence:: WA

Country of Residence:: US
Street of Mailing Address:: 1333 South 290th Place
City of Mailing Address:: Federal Way
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98003

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/02353	01/22/03
<u>PCT/US03/02353</u>	<u>Continuation-in-part of</u>	<u>10/057,475</u>	<u>01/22/02</u>
<u>10/057,475</u>	<u>Continuation-in-part of</u>	<u>10/040,862</u>	<u>11/06/01</u>
<u>10/040,862</u>	<u>Continuation-in-part of</u>	<u>09/796,692</u>	<u>03/01/01</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/223,378</u>	<u>08/07/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/223,416</u>	<u>08/04/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/222,903</u>	<u>08/03/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/218,950</u>	<u>07/14/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/206,201</u>	<u>05/22/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/202,084</u>	<u>05/04/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/200,999</u>	<u>05/01/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/200,303</u>	<u>04/28/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/200,779</u>	<u>04/28/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/200,545</u>	<u>04/27/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/190,479</u>	<u>03/17/00</u>
<u>09/796,692</u>	<u>Non-Provisional of</u>	<u>60/186,126</u>	<u>03/01/00</u>

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Corixa Corporation
Street of mailing address:: 1900 9th Avenue, Suite 1100
City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address::
Postal or Zip Code of mailing address:: 98101